

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request:	11/18/03	2 Serial/Patent #	09/675,943	
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
<input type="checkbox"/>	Filing			\$
<input type="checkbox"/>	Amendment			\$
<input type="checkbox"/>	Extension of Time			\$
<input type="checkbox"/>	Notice of Appeal/Appeal			\$
<input checked="" type="checkbox"/>	Petition	23	6/16/03	\$ 110
<input type="checkbox"/>	Issue			\$
<input type="checkbox"/>	Cert of Correction/Terminal Disc.			\$
<input type="checkbox"/>	Maintenance			\$
<input type="checkbox"/>	Assignment			\$
<input type="checkbox"/>	Other			\$
		7 TOTAL AMOUNT OF REFUND	\$ 110	
		8 TO BE REFUNDED BY:		
		Treasury Check		
<input type="checkbox"/>	Overpayment	<input checked="" type="checkbox"/>	Credit Deposit A/C #:	
<input checked="" type="checkbox"/>	Duplicate Payment	<input checked="" type="checkbox"/>	9 08-2525	
10 REASON:		No Fee Due (Explanation): <i>Already paid fee on 3/24/03</i>		
11 REFUND REQUESTED BY:				
TYPED/PRINTED NAME:		C Shurene Willis		TITLE: Pet Atty
SIGNATURE:		<i>C Shurene Willis</i>		PHONE: 308-6712
OFFICE:		<i>Office of Petitions</i>		
***** THIS SPACE RESERVED FOR FINANCE USE ONLY *****				
APPROVED:		<i>Alicia Kell</i>		
		DATE: 11/18/03		

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B